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LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
E-8183, 8184	

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.
USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. Unit Agreement Name
2. Name of Operator		8. Farm or Lease Name
Gulf Oil Corporation		
3. Address of Operator		9. Well No.
Box 670, Hobbs, New Mexico		28-13
4. Location of Well		10. Field and Pool, or Wildcat
UNIT LETTER M , 660 FEET FROM THE South LINE AND 660 FEET FROM		Pearl Queen
THE West LINE, SECTION 28 TOWNSHIP 19-S RANGE 35-E NMPM.		
15. Elevation (Show whether DF, RT, GR, etc.)		12. County
3730 GL		Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	
Perf & frac		OTHER <input type="checkbox"/>	

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

4957' TD. Plans have been made to perforate 5-1/2" casing with 4, JHPF from 4728 to 4738'. Free treat new perforations with 5000 gallons of gelled water with 1/2 to 2# SPG. Run tubing, rods and pump and return well to production.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

ORIGINAL SIGNED BY

C. D. BORLAND

SIGNED

TITLE **Area Production Manager**

DATE **February 5, 1965**

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: